

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF LOUISIANA**

CM/ECF TRAINING WAIVER REQUEST FORM

The United States District Court, Western District of Louisiana, requires that an attorney attend a training class before the attorney is given a login and password to electronically file in this court. However, an attorney may waive electronic filing training in this court if the attorney has been trained to electronically file in another district or bankruptcy court.

If you can attest that you have previously used CM/ECF to electronically file documents in another district or bankruptcy court, or you have previously attended CM/ECF training at another district or bankruptcy court, you may request a training waiver by filling out the information located below. In addition, you must also submit a signed CM/ECF Registration Form which can be found on the court's website at www.lawd.uscourts.gov.

Please type or print:

Prior CM/ECF Filing Experience:

I, _____, hereby certify that I have previously filed using CM/ECF in the United States _____ District _____ Bankruptcy Court, for the _____ District of _____.

Or, Prior CM/ECF Training Experience:

I, _____, hereby certify that I have attended CM/ECF training at the United States _____ District _____ Bankruptcy Court, for the _____ District of _____, on or about the date of _____.

I certify that I understand how to use the CM/ECF system and that I have read all court rules and procedures regarding CM/ECF. I authorize the Clerk's Office to contact me by telephone, mail or email to inform me of my login and password.

Signature/Print Name

Date

LA Bar Number

Please send to: Pam Mitchell, ECF Coordinator, at 300 Fannin, Suite 1167, Shreveport, LA 71101 or by fax to (318) 676-3962.

**United States District Court
Western District of Louisiana
ELECTRONIC CASE FILING SYSTEM
Attorney/Participant Registration Form**

This form shall be used to register for an account on the Western District of Louisiana's Electronic Filing System. Registered attorneys and other participants will have privileges to electronically submit documents and to view and retrieve electronic docket sheets and documents as available for cases assigned to the Electronic Filing systems. The following information is required for registration:

Please Type

First/Middle/Last Name: _____

Last four digits of Social Security Number: _____

Attorney Bar # and State: _____

Firm Name: _____

Firm Address: _____

Telephone Number: _____

FAX number: _____

E-Mail Address: _____

(Attorney's email for electronic service)

Additional E-Mail Address: _____

(Secretary, central repository, etc.)

****Please rate your computer skills:** ____none____a little____ know basics____very knowledgeable

How do you want to receive notice?(Pick one) _____Daily summary _____Notice after every filing

****Note: Attorneys seeking to file documents electronically must first be admitted to practice in the United States District Court, Western District of Louisiana pursuant to LR83.2.3W.**

****By submitting this registration form, the undersigned agrees to abide by all Court rules, orders and policies and procedures governing the use of the electronic filing system. The undersigned also consents to receiving notice of filings pursuant to Fed.R.Civ.P. 5(b) and 77(d) via the Court's electronic filing system. The combination of user id and password will serve as the signature of the attorney filing the documents. Attorneys must protect the security of their passwords and immediately notify the court if they learn that their password has been compromised.**

Date

Attorney/Participant Signature

Please return to: **U.S. District Court, Western District of Louisiana
Attn: Pam Mitchell, ECF Coordinator
300 Fannin, Suite 1167
Shreveport, LA 71101
Fax: (318) 676-3962**